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CONFIRMATION NO. 4993

|  |   |                               |   |                                    |
|--|---|-------------------------------|---|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/813,353   | <b>FILING OR 371(c) DATE</b><br>03/30/2004<br><b>RULE</b>   | <b>CLASS</b><br>707           | <b>GROUP ART UNIT</b><br>2166   | <b>ATTORNEY DOCKET NO.</b><br>BAR5 |
| <b>APPLICANTS</b><br>Joseph Barmakian, Westfield, NJ; <i>JB</i>  |   |                               |   |                                    |
| <b>** CONTINUING DATA *****</b><br><i>W</i>  |   |                               |   |                                    |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>W</i>   |   |                               |   |                                    |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br><b>** 06/19/2004</b>   |   |                               |   |                                    |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance <i>SA</i><br>Verified and Acknowledged <i>SA</i><br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>NJ | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>36          |
| <b>INDEPENDENT CLAIMS</b><br>2   |   |                               |   |                                    |
| <b>ADDRESS</b><br>Law Office of Thomas L. Adams<br>120 Eagle Rock Avenue<br>P.O. Box 340<br>East Hanover, NJ07936  |   |                               |   |                                    |
| <b>TITLE</b><br>System and method for managing advance directives  |   |                               |   |                                    |
| <b>FILING FEE RECEIVED</b><br>529  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                    |